

## **Arizona Department of Health Services Healthcare-Associated Infection Plan Progress Report – June 2010**

On December 31<sup>st</sup>, 2010, the Arizona Department of Health Services (ADHS) submitted the state healthcare-associated infection (HAI) plan to the United States Department of Health and Human Services. The most recent version of this plan is available on the ADHS website at <http://azdhs.gov/phs/oids/epi/pdf/ADHSHAIPan.pdf>.

This document summarizes the progress made towards achieving the objectives specified in the HAI plan from the time of plan submission through June 30<sup>th</sup>, 2010. The following components are included:

- [Summary table of progress toward plan objectives](#)
- [List of acronyms used throughout the document](#)
- [Detailed description of the HAI Advisory Committee and Subcommittees](#)

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<b>OBJECTIVES</b>	<b>PROGRESS</b>	<b>TARGET DATE</b>	<b>STATUS</b>
Establish statewide HAI prevention leadership through formation of a multidisciplinary council	<ul style="list-style-type: none"> <li>• 31 members representing multiple partner organizations currently comprise the HAI Advisory Committee</li> <li>• The HAI Advisory Committee meets monthly</li> <li>• The Advisory Committee formed four subcommittees – Surveillance, Prevention Strategies, Provider Education, Public Education – with membership comprised of Advisory Committee members and other interested individuals</li> </ul>	Initiated 10/2008; expansion 1/2010	COMPLETED <a href="#">See p. 7 for details</a>
Develop and implement a communication plan about the state's HAI program and progress to meet public and private stakeholders' needs	<ul style="list-style-type: none"> <li>• The HAI Coordinator presented the state plan to partners including APIC, AzHHA, local health departments, and the HAI Advisory Committee</li> <li>• Progress reports will be shared with the Advisory Committee and posted online on a biannual basis</li> <li>• The HAI Coordinator gives regular status updates at Advisory Committee meetings and meetings with APIC, HSAG, and local health departments</li> </ul>	Initiated 6/2009; Ongoing	INITIATED/ONGOING
Collaborate with local and regional partners	<ul style="list-style-type: none"> <li>• The HAI Coordinator has enhanced relationships with various partners including APIC, AzHHA, HSAG, AHCA, the Rural Health Office, AASCA, and Aging Services of Arizona</li> </ul>	Initiate 1/2010; Ongoing	INITIATED/ONGOING
Conduct needs assessment and/or evaluation of the state HAI program to learn how to increase impact	<ul style="list-style-type: none"> <li>• Each subcommittee of the HAI Advisory Committee is creating a survey to assess knowledge and practices among healthcare providers and the public. Results from these surveys will inform future work by the Advisory Committee and ADHS</li> <li>• The HAI Coordinator completes biannual progress reports to evaluate the extent to which the HAI program is meeting the objectives delineated in the state plan</li> <li>• The HAI Coordinator submits quarterly progress reports to CDC to fulfill Recovery Act requirements</li> </ul>	Ongoing	INITIATED/ONGOING

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Make electronic HAI prevention resources publically available	<ul style="list-style-type: none"> <li>ADHS launched the <a href="#">HAI program website</a>, which presents general information for the public, a collection of prevention recommendations for healthcare providers, information about HAI surveillance and outbreak investigation, and links to websites that report hospital performance data</li> <li>The website will be updated on a regular basis with current program activities and Advisory Committee recommendations</li> <li>The Public Education Subcommittee of the HAI Advisory Committee will use the website as one mechanism for information distribution</li> </ul>	3/2010	INITIATED/ONGOING
Train HAI staff	<ul style="list-style-type: none"> <li>The HAI Coordinator attended the SHEA Healthcare Epidemiology course in May 2010. One additional ADHS employee previously completed this course</li> <li>The Medical Director for ADHS' Bureau of Epidemiology and Disease Control provides clinical guidance to the HAI program</li> </ul>	10/2009; Ongoing	INITIATED/ONGOING
Improve coordination among government agencies that share responsibility for assuring or overseeing HAI surveillance, prevention, and control	<ul style="list-style-type: none"> <li>A strengthened relationship has been established between the Office of Infectious Disease Services (OIDS) and the Division of Licensing Services, which allows for increased communication regarding HAI issues</li> <li>OIDS and Licensing have established a process that provides transparency to HAI outbreak investigations</li> <li>This process has been vetted with local health departments and the HAI Advisory Committee, which will assist ADHS with refining the process before its final rollout to healthcare facilities</li> <li>Coordination between OIDS and Licensing has led to additional opportunities including increased communication about infectious disease cases and outbreaks, opportunities for training and education between divisions, and enhanced collaboration with partners</li> </ul>	6/2010	INITIATED/ONGOING

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Establish protocols and provide training for health department staff to investigate outbreaks, or unusual cases of HAIs	<ul style="list-style-type: none"> <li>The ADHS Special Investigations Epidemiologist is working with local health departments to create a new VISA/VRSA outbreak investigation form and will train epidemiologists at state and local health departments on the use of this form</li> </ul>	Initiate by 6/2010; Ongoing	INITIATED/ONGOING
Establish prevention working group under the state HAI advisory council to coordinate state HAI collaboratives	<ul style="list-style-type: none"> <li>The Prevention Strategies Subcommittee of the HAI Advisory Committee is working to create a toolkit that catalogs existing HAI prevention evidence</li> <li>Information in the toolkit will be rated on strength of evidence, ease of implementation, cost of implementation, and sustainability</li> </ul>	Initiate by 6/2010	INITIATED/ONGOING
Implement antimicrobial stewardship programs that target multi-drug resistant organism reduction in healthcare settings	<ul style="list-style-type: none"> <li>The Provider Education Subcommittee of the HAI Advisory Committee, comprised primarily of infectious disease physicians, infectious disease pharmacists, and infection preventionists, is working toward creation of an educational series to inform providers about appropriate antibiotic use</li> </ul>	12/2010	INITIATED/ONGOING
Develop preparedness plans for improved ADHS response to HAIs	<ul style="list-style-type: none"> <li>OIDS and Licensing have defined processes for improved HAI response</li> <li>The HAI Coordinator will work with AzHHA and the HAI Advisory Committee to refine and clarify the process</li> </ul>	12/2010	INITIATED/ONGOING
Improve overall use of surveillance data to identify and prevent HAI outbreaks or transmission in HC settings	<ul style="list-style-type: none"> <li>The Surveillance Subcommittee of the HAI Advisory Committee has established objectives that will support HAI surveillance, including assessing existing surveillance activities in a variety of healthcare settings and encouraging and supporting voluntary use of NHSN</li> </ul>	Ongoing	INITIATED/ONGOING

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Identify staff trained in project coordination, infection control, and collaborative coordination	<p>The HAI Coordinator:</p> <ul style="list-style-type: none"> <li>• fostered a relationship with the lead of the HSAG MRSA/SCIP collaborative and attends collaborative meetings</li> <li>• participates in CDC collaborative calls</li> <li>• completed project management certification training</li> </ul>	12/2010	INITIATED/ONGOING
Work with partners to improve outbreak reporting to ADHS	<ul style="list-style-type: none"> <li>• The HAI Coordinator participates on CSTE HAI conference calls to learn about other states' experiences with reporting</li> <li>• The refined HAI outbreak investigation process is intended to support improved outbreak reporting to the health department</li> </ul>	Initiate by 2/2010; Ongoing	IN PROGRESS
Develop mechanisms to protect facility/provider/patient identity when investigating incidents to promote reporting of outbreaks	<ul style="list-style-type: none"> <li>• ADHS staff are actively working to establish a protocol for disclosure of information during and after outbreak investigations</li> <li>• This protocol is intended to protect the identities of the facility, provider, and patient during the course of an outbreak investigation in order to effectively conduct the investigation</li> </ul>	1/2011	IN PROGRESS
Integrate laboratory activities with HAI surveillance, prevention, and control efforts	<p><i>Planned:</i></p> <ul style="list-style-type: none"> <li>• Establish partnership between ASL and large commercial laboratory to enhance antibiotic resistance testing</li> </ul>	6/2010	NOT STARTED
Enhance laboratory capacity for state and local detection and response to HAI issues	<p><i>Planned:</i></p> <ul style="list-style-type: none"> <li>• Establish points of contact at ASL and commercial laboratories</li> <li>• Provide educational materials to laboratories on reportable conditions</li> <li>• Determine triggers for labs to contact ADHS with emerging HAI issues</li> </ul>	6/2010	NOT STARTED
Establish HAI collaborative with at least 10 hospitals	<p><i>Planned:</i></p> <ul style="list-style-type: none"> <li>• Survey IPs to assess interest in formation of an HAI prevention collaborative</li> <li>• Establish a prevention collaborative</li> </ul>	6/2011	NOT STARTED

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**Acronym List**

<b>AASCA</b>	Arizona Ambulatory Surgery Center Association
<b>ADHS</b>	Arizona Department of Health Services
<b>AHCA</b>	Arizona Health Care Association
<b>APIC</b>	Arizona Association for Professionals in Infection Control and Epidemiology
<b>ASL</b>	Arizona State Laboratory
<b>AzHHA</b>	Arizona Hospital and Healthcare Association
<b>CDC</b>	Centers for Disease Control and Prevention
<b>CSTE</b>	Council of State and Territorial Epidemiologists
<b>HAI</b>	Healthcare-Associated Infection
<b>HSAG</b>	Health Services Advisory Group
<b>MRSA</b>	Methicillin-resistant <i>Staphylococcus aureus</i>
<b>NHSN</b>	National Healthcare Safety Network
<b>OIDS</b>	Office of Infectious Disease Services
<b>SCIP</b>	Surgical Care Improvement Project
<b>SHEA</b>	Society for Healthcare Epidemiology of America
<b>VISA/VRSA</b>	Vancomycin-intermediate <i>Staphylococcus aureus</i> /Vancomycin-resistant <i>Staphylococcus aureus</i>

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## HAI Advisory Committee Overview

- Formation:** In early 2010, ADHS initiated a new Healthcare Associated Infection (HAI) Advisory Committee in fulfillment of the former [Infection Prevention and Control Advisory Committee's](#) (IPCAC) recommendation.
- Membership:** The HAI Advisory Committee retained original IPCAC members and was expanded to include additional partners. At the current time, a total of 31 members are participating representing the state and local health departments, hospitals, long term care and assisted living facilities, and organizations including the Arizona Rural Health Office, the Association for Professionals in Infection Control and Epidemiology (APIC), Health Services Advisory Group (HSAG), the Arizona Hospital and Healthcare Association (AzHHA), the Arizona Health Care Association (AHCA), Aging Services of Arizona, the Arizona Infectious Disease Society, and the Arizona Ambulatory Surgery Center Association.
- Structure:** During their initial meeting, HAI Advisory Committee members created four subcommittees (explained below) to meet identified objectives. Membership on the subcommittees was expanded to include additional statewide partners.
- Meetings:** The HAI Advisory Committee meets on a quarterly basis. Subcommittee meetings occur on a regular basis with the frequency determined by subcommittee members.

### Subcommittee Summary:

Subcommittee Name	Initial Objectives
Prevention Strategies	Create a toolkit for hospitals, long term care and assisted living facilities, and ambulatory surgery centers that synthesizes HAI prevention evidence, guidelines, and best practices.
Surveillance	Improve knowledge base of surveillance activities in acute care facilities, long term care facilities, and ambulatory surgery centers. Support voluntary use of CDC's National Healthcare Safety Network.
Public Education	Provide education to the public about HAIs and HAI prevention strategies.
Provider Education	Develop an educational series to educate healthcare providers about appropriate antibiotic use.